

BACTERIOLOGICAL AND CHEMICAL EXAMINATION
OF DRINKING AND SWIMMING POOL WATERS
DIVISION OF LABORATORIES AND RESEARCH
Nassau County Department of Health

FIELD NO. 1A	<input type="checkbox"/> ROUTINE	<input type="checkbox"/> PUBLIC WATER
DATE 11-12-75	<input type="checkbox"/> RE-SAMPLE	<input type="checkbox"/> PRIVATE WATER
TIME 1430	<input checked="" type="checkbox"/> SPECIAL	<input type="checkbox"/> SWIMMING POOL
COL. BY JM + MF		<input checked="" type="checkbox"/> INDUSTRIAL WASTE
		<input type="checkbox"/> OTHER (Explain)

PREMISES **Photo circuits** NAME OF OWNER OR DISTRICT **(Submerged pipe s/o main bldg in psc)**
LOCATION **Sea Cliff Ave Glen Cove**

POINT OF COLLECTION **Submerged pipe** ☐ BACTERIOLOGICAL EXAMINATION ☐ CHEMICAL EXAM. COMPLETE ☐ CHEMICAL EXAM. SPECIAL

TAP FLAMED: ☐ YES ☐ NO HOW? **Color: Green**

CHLORINE RESIDUAL: **0.4** OT **0.4** OT+A **0.4** PH

IF SAMPLE IS FROM WELL, IS SANITARY SURVEY

☐ SATISFACTORY? ☐ UNSATISFACTORY? (Explain)

REMARKS, EXPLANATIONS:

PH, Cu, Zn, SO₄, Cr⁺⁶

RETURN TO:

M. Fiscina + J. Mc FIELD INVESTIGATION SEC.

LAB. NO. 21528		Examined by	
Sample was acidified in Lab. - No Acid bottle submitted			
<input type="checkbox"/> ADPS	TYPE (1)	NUMBER (2-6)	DATE (7-12)
<input type="checkbox"/> SOURCE (13) <input type="checkbox"/> (14) <input type="checkbox"/> (15) <input type="checkbox"/> (16) <input type="checkbox"/> (17) <input type="checkbox"/> (18) <input type="checkbox"/> (19) <input type="checkbox"/> (20) <input type="checkbox"/> (21) <input type="checkbox"/> (22) <input type="checkbox"/> (23) <input type="checkbox"/> (24) <input type="checkbox"/> (25) <input type="checkbox"/> (26) <input type="checkbox"/> (27) <input type="checkbox"/> (28) <input type="checkbox"/> (29) <input type="checkbox"/> (30) <input type="checkbox"/> (31) <input type="checkbox"/> (32) <input type="checkbox"/> (33) <input type="checkbox"/> (34) <input type="checkbox"/> (35) <input type="checkbox"/> (36) <input type="checkbox"/> (37) <input type="checkbox"/> (38) <input type="checkbox"/> (39) <input type="checkbox"/> (40) <input type="checkbox"/> (41) <input type="checkbox"/> (42) <input type="checkbox"/> (43) <input type="checkbox"/> (44) <input type="checkbox"/> (45) <input type="checkbox"/> (46) <input type="checkbox"/> (47) <input type="checkbox"/> (48) <input type="checkbox"/> (49) <input type="checkbox"/> (50) <input type="checkbox"/> (51) <input type="checkbox"/> (52) <input type="checkbox"/> (53) <input type="checkbox"/> (54) <input type="checkbox"/> (55) <input type="checkbox"/> (56) <input type="checkbox"/> (57) <input type="checkbox"/> (58) <input type="checkbox"/> (59) <input type="checkbox"/> (60) <input type="checkbox"/> (61) <input type="checkbox"/> (62) <input type="checkbox"/> (63) <input type="checkbox"/> (64) <input type="checkbox"/> (65) <input type="checkbox"/> (66) <input type="checkbox"/> (67) <input type="checkbox"/> (68) <input type="checkbox"/> (69) <input type="checkbox"/> (70) <input type="checkbox"/> (71) <input type="checkbox"/> (72) <input type="checkbox"/> (73) <input type="checkbox"/> (74) <input type="checkbox"/> (75) <input type="checkbox"/> (76) <input type="checkbox"/> (77) <input type="checkbox"/> (78) <input type="checkbox"/> (79) <input type="checkbox"/> (80) <input type="checkbox"/> (81) <input type="checkbox"/> (82) <input type="checkbox"/> (83) <input type="checkbox"/> (84) <input type="checkbox"/> (85) <input type="checkbox"/> (86) <input type="checkbox"/> (87) <input type="checkbox"/> (88) <input type="checkbox"/> (89) <input type="checkbox"/> (90) <input type="checkbox"/> (91) <input type="checkbox"/> (92) <input type="checkbox"/> (93) <input type="checkbox"/> (94) <input type="checkbox"/> (95) <input type="checkbox"/> (96) <input type="checkbox"/> (97) <input type="checkbox"/> (98) <input type="checkbox"/> (99) <input type="checkbox"/> (100)			
APC/ML 350 C-24 hrs.		16. 18. 20. 22.	
COL. I, MPN/100 ML		20. 22.	
Vol.	% Gas	Loc. Broth	Loc. Broth
24 hrs.	48 hrs.	24 hrs.	48 hrs.
10 ml.			
1 ml.			
0.1 ml.			
Color			
Turbidity			
Odor: Cold			
Odor: Hot			
Total Iron	ml. Sample	31.	35.
MN.	ml. Sample	36.	30.
Free CO ₂ (Nemograph)		39.	41.
Fluoride	ml. Sample	42.	40.
sample	ml.	N	45.
sample	ml.	Ammonia	49.
sample	ml.	Albuminoid	52.
sample	ml.	N	53.
sample	ml.	Nitrites	56.
sample	ml.	N	57.
sample	ml.	Nitrotes.	60.
sample	ml.	Oxygen Consumed	61.
sample	ml.	Chlorides	64.
sample	ml.	Total Hardness	69.
sample	ml.	TALK	72.
sample	ml.	Hydrogen Ion Conc.-pH	75.
sample	ml.	CA Hardness	30.
sample	ml.	Temp (Field)	33.
sample	ml.	Temp (Lab)	35.
sample	ml.	P. ALK	36.
sample	ml.	Phos. (Total)	40.
sample	ml.	Phos. (Ortho)	44.
sample	ml.	Cu	48.
sample	ml.	Zn	51.
sample	ml.	Pb	54.
sample	ml.	Cd	57.
sample	ml.	Cr	61.
sample	ml.	Sulphate	69.
sample	ml.	Acidity	72.
sample	ml.	NI	74.

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